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PTO/SB/17 (10-07)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>Effective on 12/08/2004.</b> Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <b>FEE TRANSMITTAL</b> <b>For FY 2008</b>		<b>Complete if Known</b>	
		Application Number	10/559,936
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	December 8, 2005
TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	Paolo Bellini
		Examiner Name	Allen, Andre J.
		Art Unit	2855
		Attorney Docket No.	82652-244273

**METHOD OF PAYMENT** (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
				<u>Fee (\$)</u> <u>Fee Paid (\$)</u>

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): \_\_\_\_\_

<b>SUBMITTED BY</b>			
Signature	<u>Steve Schwarz</u>	Registration No. (Attorney/Agent)	47,070 Telephone (202) 344-4295
Name (Print/Type)	Steven J. Schwarz	Date	<u>3/27/2008</u>

#272752



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:  
Paolo Bellini et al.

Art Unit: 2855

Appl. No.: 10/559,936

Examiner: Andre J. Allen

Confirmation No.: 1041

Filed: December 8, 2005

Atty. Docket No.: 82652-244273

For: PRESSURE SENSOR WITH  
INTEGRATED STRUCTURE

Customer No.

**26694**

PATENT TRADEMARK OFFICE

**Request For Acknowledgement of Previously Filed Information**  
**Disclosure Statement**

**Mail Stop Issue Fee**

Honorable Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

Enclosed is a copy of an Information Disclosure Statement, PTO Form 1449, and cited European Patent that were previously filed in this application on December 8, 2005. The Applicant received a Notice of Allowance in this case on January 25, 2008, however, an initialed and signed copy of the enclosed PTO Form 1449, indicating consideration of the four cited references, has not been received by the Applicant. The Applicant believes that the Information Disclosure Statement is in compliance with the applicable Patent and Trademark Office regulations, and further believes that the cited references should have been considered.


Applicant: Paolo Bellini et al.  
Appl. No.: 10/559,936

**Accordingly, the Applicant requests that the Examiner initial and sign the enclosed PTO Form 1449 and return it to the Applicant as soon as possible.**

No fee is believed to be due for this submission. However, should a fee be due, please charge such fee to our deposit account number 22-0261, referencing our matter number 82652-244273, and notify the undersigned.

Respectfully submitted,

Date: 3/27/2008

  
Steven J. Schwarz  
Registration No. 47,070  
VENABLE LLP  
P.O. Box 34385  
Washington, DC 20043-9998  
Telephone: (202) 344-4000  
Telefax: (202) 344-8300

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